

Juliet,  
SickKids patient

# 2024 PROGRESS REPORT GREAT CYCLE CHALLENGE

Donors and participants help us  
diagnose faster, treat smarter,  
and predict better.

**SickKids**  
**VS**



# MAKING TREATMENTS POSSIBLE

Knocking down barriers to care.

Access to clinical trials is essential for children with cancer to receive new therapies, significantly contributing to the progress made in curing 85 per cent of childhood cancers.

As we advance into the era of immunotherapy and precision medicine, many effective treatments for relapsed cancer patients are now being tested in upfront studies. For instance, SickKids is the only centre in Canada outside of Quebec offering MIBG therapy for neuroblastoma. However, these trials require patients to travel, and Canada's health care system does not currently support out-of-province funding for certain studies.

While drug company-sponsored trials cover additional costs, academic trials lack such funding and require further financial support

to manage these studies' comprehensive costs. Your support is crucial in maintaining and expanding these services, supporting groundbreaking research and improving outcomes for children across Canada.

## U-LINK SUPPORT

The Canadian clinical trial landscape is fraught with challenges, but it's also rife with opportunity. Canadian families and health care workers need better access to and communication for clinical trials. With support from donors and participants of Great Cycle Challenge (GCC), we have found a way to make this happen.

Dr. Sarah Cohen-Gogo hails from France and joined the Garron Family Cancer Centre (GFCC) team in 2018. Soon after her arrival, she suggested the GFCC develop a Canadian version of U-Link—an established French web-based cancer clinical trials information source for hospital care providers and families in France.

U-Link also assists with travel and accommodation costs when families access trials outside their local treatment centres. With help from French website developers and the valuable time and input of national groups like Children's Cancer & Blood Disorders (C17) and Advocacy for Canadian



Dr. Sarah Cohen-Gogo

**27.5%**

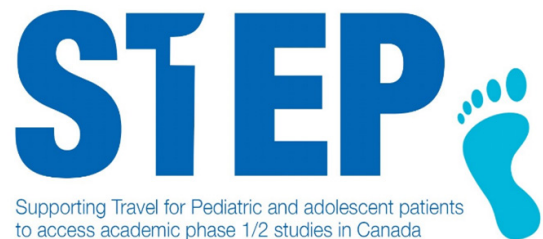
of children with cancer up to 14 years old are enrolled in a clinical trial at diagnosis. 68% are not due to lack of an available trial.

Childhood Oncology Research Network (Ac2orn), Childhood Cancer Canada, and the GFCC, U-Link Canada was launched. This invaluable resource is a testament to the collaborative, compassionate care the GFCC can enable with support from GCC donors and participants.

While existing financial assistance programs are hugely beneficial, they often fall short of covering all expenses for families traveling to Toronto for clinical trials. These programs have caps and offer reimbursement after expenses are incurred, which is challenging for families without immediate financial resources. To address this gap, the GFCC has piloted a new initiative called STEP1. This program provides comprehensive funding for all costs associated with clinical trial participation at GFCC, ensuring that financial barriers do not prevent families from accessing crucial treatments. The goal is to remove the financial burden entirely from the families, allowing them to focus solely on their child's health.

The STEP1 program's research component is crucial for understanding its impact on paediatric clinical trials. By gathering data on patient benefits and incurred costs, we aim to demonstrate how removing financial barriers enhances trial enrollment and identifies further challenges in accessing innovative studies across provinces.

We will conduct thorough evaluations, including initial and follow-up surveys with health care providers, to measure the program's influence on early-phase clinical trial referrals and outcomes. This research will provide compelling evidence of STEP1's effectiveness, guiding future improvements and ensuring more children can access life-saving treatments regardless of their financial situation.



Supporting Travel for Pediatric and adolescent patients to access academic phase 1/2 studies in Canada

**“Having equal access to early phase or novel clinical trials for all children across Canada is an essential part of how we provide care at SickKids.”**

**- DR. JIM WHITLOCK,  
Director, Garron Family Cancer Centre**

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# MEET LEENA

You're helping kids like her.



Leena's journey began innocuously enough, with a routine illness that quickly escalated into a life-altering disease. At just 18 months old, she was diagnosed with stage 4 high-risk neuroblastoma after a mark on her liver led to a devastating discovery of cancerous growths throughout her body. Her treatment at SickKids started quickly, involving a grueling regimen of chemotherapy, surgeries, radiation, and immunotherapy. Despite the severity of her illness, Leena showed remarkable resilience and maturity beyond her years, finding joy in simple activities like playing doctor and dancing.

Throughout Leena's journey, her family found solace and strength within the supportive community at SickKids, where caregivers and fellow families became a source of comfort and companionship. The Hospital, once a place of fear and uncertainty, soon became a second home where compassionate care and expert treatment provided hope during the darkest times. Leena's progress has been marked by significant milestones, including a recent clear scan indicating "no evidence of disease." As she continues her final phase of treatment, Leena's family remains hopeful. You're riding for and supporting kids like Leena. Thank you.





## A NON-SURGICAL SOLUTION

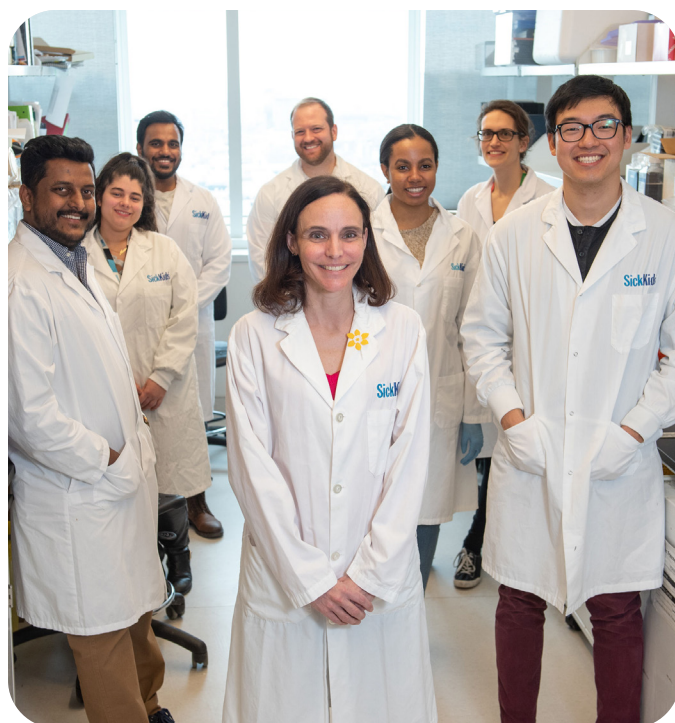
When a child is diagnosed with brain cancer, a biopsy of the tumour tissue for DNA testing is the best way to identify life-saving individualized treatment options. But a biopsy requires brain surgery—invasive, fraught with post-surgical complications, and often anxiety-inducing. Sometimes, the tumour is in such a hard-to-reach part of the brain that a surgical biopsy is impossible. For those patients, individualized therapies aren't even an option, and oncologists have to fight the cancer without a complete picture of what they are up against.

Dr. Cynthia Hawkins, Pathologist in Molecular Biology and Garron Family Chair in Childhood Cancer Research at SickKids, is testing cerebral spinal fluid (CSF)—the liquid surrounding the brain and spinal cord—for traces of a brain tumour's DNA. Gathering a small sample of this fluid requires a straightforward lumbar puncture. "These kids won't need surgery for us to find genetic mutations that we can target with better drugs. We remove a small amount of fluid from the spine with a needle. That's all," Dr. Hawkins explains.

This test is the first of its kind—a game-changing opportunity for better outcomes. With it, we can better diagnose patients and follow them over time, predicting responsiveness to subsequent medications, especially in the case of relapse. SickKids teams are now performing liquid biopsies for other cancers using a blood sample. Funds raised by GCC are helping to expedite this testing for clinical use as fast and efficiently as possible so more kids with cancer can benefit from it.

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**- DR. CYNTHIA HAWKINS**



*Dr. Cynthia Hawkins and her team*

# THANK YOU

With GCC support, SickKids can continue to pursue the greatest challenges in childhood cancer research and care. We can diagnose faster and treat smarter, helping to heal children with cancer across Canada. Our gratitude for your continued commitment to their future cannot be overstated.

**FOR MORE INFORMATION, PLEASE CONTACT:**

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